INSTRUCTIONS FOR POVERTY EXEMPTION CITY OF GRAND RAPIDS

The application for Poverty Exemption is under the authority of Michigan State Statute, MCL 211.7u and Grand Rapids City Commission Policy 700-07. To be considered for a poverty exemption, the following information **must be** provided:

- 1. Thoroughly complete ALL sections of the POVERTY EXEMPTION APPLICATION.
- 2. Submit a completed and signed copy of the following:
 - 2019 Michigan Homestead Property Tax Credit Claim (MI 1040 CR).
 - 2019 Michigan Income Tax Return.
 - 2019 Federal Income Tax Return (1040)
 - 2019 Federal Income Tax Return (1040) for all other occupants of your household.
 - 2019 City Income Tax Return.
 - State of Michigan Form 4988, if you are not required to file State or Federal income tax.
- 3. Submit income verification for yourself and all persons in the household including dependents. This includes, but is not limited to, all of the following: Social Security income, disability income, cash assistance, documentation of rental income, child support, alimony, food assistance and all other sources of income.
- 4. **All occupants** of the household aged 16 years of age and older, must provide income verification from all sources. Household is defined as, "A number of related or unrelated persons who live in one housing unit." A single person, a couple, or more than one family living in a single housing unit may make up a household."
- 5. Submit a copy of the deed, land contract or other proof of ownership.
- 6. Submit a copy of your driver's license or state ID for yourself and all persons in the household, 16 years of age or older.
- 7. Assets (this includes but, is not limited to vehicles, furniture, appliances, bank/credit union accounts, retirement/401K/IRA, stocks/bonds and all other assets).
- 8. The application must be legible. If you need to provide additional information, please attach a separate sheet.
- 9. Do not submit originals of supporting documentation as these are kept for records of the Board of Review.
- 10. If the application is incomplete, or if you fail to include the required documents, the exemption may be denied by the Board of Review.
- 11. This exemption does not apply to previous years.

You may apply only once per current calendar year. This exemption does not apply to previous years.

For consideration of the poverty exemption before the March Board of Review, please submit application and supporting documents **prior to March 6, 2020**. This meeting is scheduled March 3 through March 20, 2020.

If you would like your 2020 application to be considered on July 21, 2020 by the July Board of Review, please submit the application **no later than July 7, 2020**.

If you would like your 2020 application to be considered on December 15, 2020, please submit the application **no later than December 1, 2020**. This is the final opportunity to submit an appeal for 2020.



CITY OF GRAND RAPIDS

REAL PROPERTY TAX EXEMPTION APPLICATION DUE TO POVERTY

Ordinance No. 2014-77 makes it a criminal misdemeanor offense to provide false information on any form required to be filed with the City Assessor. Offenses will be prosecuted in the 61st District Court.

Filing deadline for application and all information is 3 days prior to the Board of Review

FAILURE TO ANSWER ALL QUESTIONS AND SUBMIT ALL INFORMATION REQUESTED MAY RESULT IN DENIAL OF THE EXEMPTION BY THE BOARD OF REVIEW

Parcel N	Number:				
Propert	y Address:				
Owner	Name(s):				
Owner	Phone Number:				
		full name? (Please print)			
1.	Are you the owner of the above property?		YES NO (circle one) Please attach a copy of the deed, land contract other proof of ownership.		
2.	Do you live at t	he address above?	YES NO (circle one	•	
3.	How long have you lived at this address?		· ·	,	
4.		names and ages of all persor of your valid photo ID and c	•	(including applicant)? Please ars of age and older.	
<u>NAME</u>		<u>AGE</u>	<u>NAME</u>	<u>AGE</u>	

City Assessor's Office 300 Monroe Ave NW Grand Rapids MI 49503 616-456-3081

5.	What is the combined monthly inco	me for	all mem	bers of the hous	sehold?	\$	/month
6.	Do you have any assets (see next pa	age for	example	s)?	YES	NO	(Circle one)
	Do you or any member of your hou yo other property?	sehold (-	other property, e one)	or are y	ou in the	e process of buying
	If yes, please list						
	Property Address:						
	Name of Owner:						
8.	Are you presently employed?	YES	NO	(Circle one)			
	Is your spouse presently employed?	YES	NO	(Circle one)			
	If yes, where?						
							·

INCOME/EXPENSE WORKSHEET

MONTHLY INCOME: (Sources include but, are not limited to: wages, salaries, tips, social security, pension, disability, cash assistance, child support, food assistance, rental income, workers comp, other). A copy of written verification must be submitted.

Name of Recipient		Source of Income	Amount Received
			\$
			~
			č
			<u> </u>
			*
MONTHLY EXPENSES	S:		
Mortgage	\$	Phone/Internet	\$
Gas/Electric	\$	Cable	\$
Water/Sewer	\$	Insurance	\$
Medical	\$	Other	\$
Other	\$	Other	\$
ASSETS: List all assets	owned by you	and all occupants of the househo	old. Verification must be provided
(current bank/credit u	ınion statement	s, copies of car titles, other).	
Bank/Credit Union:		·	\$
Bank/Credit Union:			\$
IRA/401K:			\$
Stocks/Bonds/Other:			\$
			\$
Vehicles/Boats/Other			
Year/Make/Model:			Value \$
			Value \$
Household Assets	Value	9	
Furniture:	\$		
Appliances:			
Other:	\$		
Real Estate:	Address		Value
Primary Residence:	7100.000		\$
Other Property:			
Other Property.			
I have received a copy them.	of the instructi	ons for poverty exemption. I have	ve read through and understand
Please initial:	-		
I hereby swear that al	l of the informa	tion I have provided is true unde	r penalty of law.
Signed:		Da	ate:

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